

Year Nine (October 1, 1990 - September 30, 1991)

Enrollment: 383,824 **acute** care members (191,951 AFDC & AFDC/MAO, 44,933 SSI & SSI/MAO, 43,248 MN/MI, 23,129 EAC, 4,023 ELIC, 66,511 SOBRA Children, and 10,029 SOBRA Women), 14,501 **ALTCS** members. 3,817 persons enrolled in **Healthcare Group**.

Program:

Acute Care

- Expansion of SOBRA eligibility from 133% FPL to 140% FPL for pregnant women and infants effective October 1, 1990. (HB 2351, Chapter 333, Laws of 1990)
- QMB eligibility increased to individuals with incomes up to 100% FPL effective January 1, 1991. (SB 1140, Chapter 213, Laws of 1991)
- OBRA 90 mandates adopted: infants retain eligibility for 12 months if mother would be eligible if still pregnant; and, children born on or after September 30, 1983 with incomes up to 100% FPL eligible up to age 18 effective July 1, 1991. (SB 1140, Chapter 213, Laws of 1991)
- 15 Health Plans served AHCCCS members.

ALTCS

- HCFA set HCBS cap at 18 percent of the total budget for the EPD population.
- A 1991 Laguna Research study showed that long term care costs under AHCCCS were lower than in states with case management services, and that the preadmission screening was better than in many other states.
- 7 Program Contractors served ALTCS members.

Behavioral Health

- AHCCCS functions in a regulatory role for ADHS which is responsible, by statute, for the provision of behavioral health services to Title XIX eligible persons.
- Phased in behavioral health services (HB 2554, Chapter 334, Laws of 1990) in the acute care program for Title XIX members: 1) under the age of 18 who are SED, effective October 1, 1990; and 2) under age 18 who are not SED, effective on April 1, 1991.

Indian Health Care

Under terms of a settlement between AHCCCS and IHS: 1) AHCCCS agreed to pay before IHS for services provided to AHCCCS eligible Native Americans who are referred off-reservation for health care services; 2) the Federal government agreed to pay \$2 million for health care services already rendered; and 3) both parties agreed to work towards an improved eligibility process on Arizona's reservations.

Healthcare Group

- Effective August 1991, the limitation on the number of employees in a company is expanded from 25 to 40 employees. (HB 2077, Chapter 299, Laws of 1991)

Waivers:

- Dropped the waiver that exempted the State from federal requirements for timely financial eligibility determination for long term care recipients during the start up of ALTCS.

Financial:	<u>Source</u>	<u>SFY Expenditures</u>	<u>Percentage</u>
	Federal	\$467,687,600	48.6
	State	333,186,800	34.6
	Other	161,248,200	16.8
	TOTAL	\$962,122,600	100.0

Does not include DSH payments and appropriations made to other State agencies.

Administration:

- Number of FTEs = 923
- In early March 1991, after an extensive test period, PMMIS becomes operational.